

POSITION	ID NO.	DATE
CLASSIFIER	10	5-31-95
EXAMINER	288	6-6
TYPIST	343	6/12/95
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
1	5-10-95
2	5-10-95
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48	5-10-95
49	5-10-95
50	5-10-95

SYMBOLS:

Rejected
 Allowed
 (through number)
 Cancelled
 Restricted
 Non-elected
 Interference
 Appeal
 Objected

Claim	Date
1	5-10-95
2	5-10-95
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45	5-10-95
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48	5-10-95
49	5-10-95
50	5-10-95

INDEX OF CLAIMS

Claim		Date
Final	Original	
20	1	✓
20	2	
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20	50	✓

SYMBOLS

✓	Rejected
■	Allowed
- (Through numerical)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim		Date
Final	Original	
51	✓	
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*All
Rejected*

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INDEX OF CLAIMS

Claim	Date	
Final	Original	
51	5-12	
52	1-19	
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SYMBOLS

-	Rejected
-	Allowed
- (Through numeral)	Canceled
+	Restricted
N	Non-elected
I	Interference
A	Appeal
O	Objected

Claim	Date	
Final	Original	
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Final Origin	Date
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If more than 150 claims or 9 actions staple additional sheet here

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